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# WOMAN IN SEXIST SOCIETY

*Studies in Power and Powerlessness*

Edited by VIVIAN GORNICK  
and BARBARA K. MORAN

*Organs & Orgasms*  
*Alix Kates Shulman*



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## ORGANS AND ORGASMS

Alix Shulman 1971

This essay is not about love-making, a subject comprising emotional as well as anatomical considerations. Rather, it is about genital relations, and how they have adversely affected the lives of women. The myths and lies about female genital anatomy are so widespread and so harmful to women that the subject deserves an altogether separate consideration, even though it is only half the story.

Almost from the very beginning of our lives, we are all taught that the primary male sex organ is the penis, and the primary female sex organ is the vagina. These organs are supposed to define the sexes, to be the difference between boys and girls. We are taught that the reason for the differences, and the use to which the sex organs are put, has to do with making babies.

This is a lie. In our society only occasionally are those organs used to make babies. Much more often they are used to produce sexual pleasure for men, pleasure which culminates in ejaculation. The penis and the vagina together can make either babies or male orgasms; very rarely do the two together make female orgasms. Men, who have benefited greatly from both orgasms and babies, have had no reason to question the traditional definition of penis and vagina as true genital counterparts.

Women, on the other hand, have. Woman's sexual pleasure is often left out in these definitions. If people considered that the purpose of the female sex organs is to bring pleasure to women, then female sex would be defined by,

and focused on, a different organ. Everyone would be taught from infancy that, as the primary male sex organ is the penis, so the primary female sex organ is the clitoris.

Men could never plead ignorance, as they now commonly do, if from the beginning, their sex education went something like this:

BOY: What's the difference between boys and girls?

MOTHER: Mainly their sex organs. A boy has a penis and a girl has a clitoris.

BOY: What's a clitoris?

MOTHER: It's a tiny sensitive organ on a girl's body about where a penis is on a boy's body. It feels good to touch; like your penis.

BOY: Do girls pee through their clitorises?

MOTHER: No.

BOY: What's it for?

MOTHER: For making love, for pleasure. When people love each other, one of the ways they show it is by caressing one another's bodies, including their sex organs.

BOY: How do girls pee?

MOTHER: There's an opening below the clitoris for peeing. A man uses his penis for peeing, for making love, and for starting babies. Women have three separate places for these. For peeing they have an opening into the urethra; for making love they have a clitoris; and for the first step in making babies they have a separate opening into the vagina. A lot of other organs in women and men are used in making babies too.

BOY: How are babies made? (And so on . . .)

### ORGANS

It has long been known that the clitoris is endlessly more sensitive than the vagina, more sensitive than the penis too, if one judges by the number of nerve endings in the organs. In fact, anatomically, the clitoris and the penis have many similarities since they develop from the same cells in the female or male fetus. Yet, as Ruth Herschberger pointed out in her brilliant 1948 book on female sexuality, *Adam's Rib*, society refuses to acknowledge it: It was quite a feat of nature to grant the small clitoris the same number of nerves as the penis. It was an even more incredible feat that society should actually have convinced the possessors of this organ that it was sexually

inferior to the penis."<sup>1</sup> The vagina, on the other hand, is for the most part so little sensitive that women commonly wear a diaphragm or tampon in it, and even undergo surgery on it, without feeling any sensation at all.

Despite the known anatomical facts and the experiences of many, many women, men usually insist that the vagina is the organ of female pleasure. Most of them insist, and probably believe, that women, like men, achieve orgasm by means of the movement of the penis back and forth into the vagina. While perpetuating this myth of vaginal primacy, from which they so readily benefit, the male "experts" make a small concession to the puzzling discrepancies in the "facts." Taking their cue from Freud, they claim that there are *two* kinds of orgasm: vaginal and clitoral. But of the two, they argue, only the vaginal kind, which is adapted to the male anatomy and suits male pleasure, is necessary, is valuable; the clitoral kind is not. Here is Freud himself:

In the phallic phase of the girl, the clitoris is the dominant erotogenic zone. But it is not destined to remain so; with the change to femininity, the clitoris must give up to the vagina its sensitivity, and, with it, its importance, either wholly or in part. This is one of the two tasks which have to be performed in the course of the woman's development; the more fortunate man has only to continue at the time of his sexual maturity what he has already practiced during the period of early sexual expansion.<sup>2</sup>

A woman who fails to transfer her sexual sensitivity from the clitoris to the vagina at puberty is, according to Freud, regressive, infantile, neurotic, hysteric, and frigid. The vaginal orgasm is supposedly mature, beautiful and good, while the clitoral orgasm is infantile, perverse, bad. A woman is frigid according to many of Freud's followers even today, if she does not have vaginal orgasms even though she may have frequent clitoral orgasms.

In their jokes and in their pornography, in their theories and in their marriage manuals, men treat the clitoris as simply one more erogenous zone like the breasts, underarms, or ears, to be used to arouse a woman sexually so that she will permit intercourse. They may remember the clitoris in foreplay, but for real sex, back to the vagina! The true center of female sexuality, the clitoris, is never identified for little girls who, when they accidentally discover they have one, often think themselves freaks to

have on their bodies such a sensitive, unnamed thing. Most girls are not even told about the clitoris at puberty, when they may be instructed in the rites of feminine hygiene and intercourse. The diagrams of female genital anatomy that accompany most tampons and birth control devices usually illustrate the urinary bladder and the ovaries, but hardly ever the clitoris.

#### ORGASMS

Women know from personal experience that there is only one kind of orgasm, no matter what name it is given, vaginal, clitoral, psychological. It is a sexual orgasm. Women know there is only one set of responses, one group of things that happen in their bodies during orgasm. It may vary in intensity from one experience to another, but for any woman who has ever masturbated, orgasm is unmistakable and certainly cannot be confused with anything else. No woman masturbating ever wonders whether or not orgasm has occurred. She has no doubts about that. When it happens, she knows it.

The recent laboratory research on female sexuality conducted by Virginia Johnson and William E. Masters confirms clinically what women know to be true from their own experience. If a woman experiences orgasm during intercourse, it is not a special kind of orgasm with a special set of physiological responses; it is like any other orgasm. Without exception, the Masters-Johnson data show that all orgasms, *no matter what kind of stimulation produces them*, result in almost identical bodily changes for all women—vaginal contractions, increase in body temperature, increase in pulse and respiration rate, and so forth. Though it is produced through the clitoris, the orgasm occurs as well in the vagina, the anus, the heart, the lungs, the skin, the head.

Given this clarity about what an orgasm feels like, why then does a woman occasionally confess she "doesn't know" whether or not she has had orgasm during intercourse? If orgasm had occurred, she would know it. Since she does not know it, it cannot have occurred. Nevertheless, since she has been taught to expect some special kind of orgasm called vaginal orgasm which can occur only during intercourse, she wonders. She can not know what such an orgasm is supposed to feel like because *there is no*

such thing. The sensations of a penis in a vagina are indeed different from other sensations; accompanied by the right emotions they may be so pleasurable as to tempt a woman to hope that they can somehow qualify for that mysterious, desirable thing that has been touted as vaginal orgasm, even though they may not at all resemble the sensations she knows as orgasm. If she does not take advantage of the mystery and confusion surrounding the term to believe that perhaps she has indeed had a vaginal orgasm, she may feel compelled at least to pretend that she has. If not, she must submit to being called frigid or infantile by professional name-calling psychologists, doctors, and all who listen to them, and she must risk the displeasure and reprisal of her mate.

The truth is, there is only one kind of orgasm, one set of physiological responses constituting orgasm, all those Freudians to the contrary. The term "vaginal orgasm" must go. It signifies orgasm achieved by means of intercourse alone (for which no special term is necessary), or it signifies nothing at all. Some women testify to having experienced orgasm at some time in their lives through intercourse alone; some women say they have experienced orgasm through stimulation of the breasts alone; or through stimulation of the mind alone, or during dreaming. Apparently orgasm can be achieved by various routes. However, the Masters-Johnson research shows the most reliable way of regularly reaching orgasm for most women is by stimulation of the clitoris.

The clitoris may be stimulated to climax by a hand, by a tongue, or, particularly if the woman is free to move, by a control the man's movements, by intercourse. No one way or combination of ways is "better" than any other, though women often prefer one way or another, finding that one way is rather more effective than another. Evidently for most women, intercourse by itself rarely results in orgasm, though vaginal stimulation may certainly make enjoyable foreplay or even afterplay. Masters and Johnson observe that the clitoris is automatically "stimulated" by intercourse since the hood covering the clitoris is pulled over the clitoris with each thrust of the penis in the vagina—much, I suppose, as a penis is automatically "stimulated" by a man's underwear whenever he takes a step. I wonder, however, if either is erotically stimulating itself.

## REACTIONS

The word about the clitoris has been out for a long time, and still, for political reasons, society goes on believing the old myths and enforcing a double standard of sexuality. Some societies have dealt with the facts by performing clitoridectomies—cutting off clitorises. More commonly, the facts about female sexuality are simply suppressed, ignored, or explained away. A century before Freud, for example, the learned Diderot cited women's lack of control over her senses<sup>3</sup> to explain the infrequency of her orgasm during intercourse:

There are some women who will die without ever having experienced the climax of sensual pleasures. . . . Since [women] have much less control over their senses than we, the rewards they receive from them are less certain and less prompt. Their expectations are being continually belied. With a physical structure so much the opposite of our own, the cue that sets their sensuality in play is so delicate and its source so far removed that we cannot be surprised at its not reaching fulfillment or becoming lost on the way.<sup>4</sup>

Freud's ingenious formulation, though widely believed, is only one of many.

Since the Kinsey Report and the Masters-Johnson studies, it has become increasingly embarrassing to certain experts and self-styled lovers to go on ignoring the clinical facts and the testimony of women. In 1966 in an analysis of the Masters-Johnson research, Ruth and Edward Brecher listed three myths now recognized to have been disproved by the sex research, among them the myth that women have two kinds of orgasm, one clitoral, the other vaginal. The Brechers' conclusion was that "women concerned with their failure to reach 'vaginal orgasm' can thus be reassured."<sup>5</sup> But that is surely the wrong conclusion. It is not women who have been "failing" and must be "reassured." It is the male-dominated society that has been failing and must be changed. Many studies of female sexuality (95 percent of which, Masters and Johnson point out, are undertaken by men "either from the defensive point of view of personal masculine bias, or from a well-intentioned and often significant scientific position,

but, because of cultural bias, without opportunity to obtain unprejudiced material")<sup>6</sup> remark on the spectacularly high degree of frigidity among women. Almost all of them interpret it as a failing of women, not of men or of society, despite the intrusive fact that, as Masters and Johnson observe, "women's . . . physiological capacity for sexual response infinitely surpasses that of man."

Although Masters and Johnson share the assumptions of our male culture that woman's goal must be to reach orgasm during intercourse—even though this usually requires getting to the brink of orgasm outside intercourse—in their newest report, *Human Sexual Inadequacy*, they examine the causes of "female sexual dysfunction" more honestly than their predecessors.

Sociocultural influence more often than not places woman in a position in which she must adapt, sublimate, inhibit, or even distort her natural capacity to function sexually in order to fulfill her genetically assigned role [i.e., breeding]. *Herein lies a major source of woman's sexual dysfunction.*<sup>7</sup>

Probably hundreds of thousands of men never gain sufficient ejaculatory control to satisfy their wives sexually regardless of the duration of marriage or the frequency of natural sexual exposure.<sup>8</sup>

Another salient feature in the human female's disadvantaged role in coital connection is the centuries-old concept that it is woman's duty to satisfy her sexual partner. When the age-old demand for accommodation during coital connection dominates any woman's responsiveness, her own opportunities for orgasmic expression are lessened proportionately. . . . The heedless male driving for orgasm can carry along the woman already lost in high levels of sexual demand, but his chances of elevating to orgasm the woman who is trying to accommodate to the rhythm, depth, and power of his demanding pelvic thrusting are indeed poor.<sup>9</sup>

The most unfortunate misconception our culture has assigned to sexual functioning is the assumption, by both men and women, that men by divine guidance and infallible instinct are able to discern exactly what a woman wants sexually and when she wants it. Probably the fallacy has interfered with natural sexual interaction as much as any other single factor.<sup>10</sup>

The husband must not presume his wife's desire for a particular stimulative approach, nor must he introduce his own choice of stimuli.<sup>11</sup>

But of the experts, Masters and Johnson are almost alone in not blaming women for the terrible betrayal of their sex lives.

Why? Clearly, this state of ignorance is not a result of simple unavailability of the facts. It is a manifestation of political and social choices. For, as Ann Koedt pointed out in "The Myth of the Vaginal Orgasm," "Today, with extensive knowledge of anatomy . . . there is no ignorance on the subject. There are, however, social reasons why this knowledge has not been popularized. We are living in a male society which has not sought change in women's rôle."<sup>12</sup> No, given our male-dominated society, the mere facts about female sexuality are not enough. The medical experts to this day find it easy to acknowledge the research evidence about the primacy of the clitoris—and then to dismiss its obvious meaning. Dr. Leslie H. Farber, for example, upon learning that the female orgasm is not produced by the vagina, simply throws out the importance of female orgasm. In a celebrated essay lamenting the Masters and Johnson research, Dr. Farber announced:

As far as I know little attention was paid to female orgasm before the era of sexology. Where did the sexologists find it? Did they discover or invent it? Or both? . . . My guess, which is not subject to laboratory proof, is that the female orgasm was always an occasional, though not essential, part of woman's whole sexual experience. I also suspect that it appeared with regularity or predictability only during masturbation. . . . *She was content with the mystery and variety of her difference from man, and in fact would not have had it otherwise.*<sup>13</sup>

But surely, some attention was paid to female orgasm before the era of sexology, or else how could it have appeared "with regularity . . . during masturbation"? What Dr. Farber apparently means to say is that before Kinsey little attention was paid to female orgasm by men. Too true. Why does Dr. Farber lament the findings of the sexologists? Because look what the findings do to a man's life. Nowadays, while ejaculating a man must "learn to take his moment in stride, so to speak, omitting the difference these moments usually call forth and then with-

out breaking stride get to his self-appointed and often fatiguing task of tinkering with his mate—always hopeful that his ministrations will have the appearance of affection.<sup>14</sup> If a woman had to endure that attitude to reach orgasm outside of masturbation, no wonder she preferred to accept her "difference from man." As Masters and Johnson observe "ejaculation . . . may provide welcome relief for the woman accepting and fulfilling a role as a sexual object."<sup>15</sup>

Donald W. Hastings, reviewing medical literature dealing with masturbation, observes a double standard of sexuality (and likely its cause) which in less sensational form persists to this day.

Articles in the older literature even went so far as to advocate the following procedures for correcting female masturbation: amputation or cautery of the clitoris, . . . miniature chastity belts, sewing the vaginal lips together to put the clitoris out of reach, and even castration by surgical removal of the ovaries. [But, continues Dr. Hastings in a footnote,] there are no references in the medical literature to surgical removal of testicles or amputation of the penis to stop masturbation. One wonders what heroic measures might have been proposed for boys if women instead of men had composed the medical profession of the time.<sup>16</sup>

Yes, one wonders. And one wonders what might have been defined as the major male and female sex organs, the standard sexual position, the psychic "tasks of development" as Freud called them, and in fact, masculinity and femininity themselves, if women instead of men had composed not only the medical profession, but the dominant caste in society as well.

Men do not easily give up the myths about female sexuality because, whether they are aware of it or not, men benefit from believing them. Believing in the primacy of the vagina allows them to use women for their own sexual pleasure, commandeering vaginas without considering themselves rapists. Believing in vaginal orgasm frees them of responsibility for a woman's sexual pleasure; if a woman does not reach orgasm through intercourse, it is her own psychological failing. If they give pleasure to a woman another way, they are doing her a favor. It does not occur to them that, as Ann Koedt says, "if certain sexual positions now defined as 'standard' are not mutually con-

ducive to orgasm, they [must] no longer be defined as standard."<sup>17</sup> They do not admit that, as Ti-Grace Atkinson observes in "The Institution of Sexual Intercourse," "the whole point of vaginal orgasm is that it supports the view that vaginal penetration [by a penis] is a good in and for itself."<sup>18</sup> By perpetuating these myths society perpetuates the notion that women must be dependent solely on men for their sexual satisfaction and subordinate to the male interpretation of female pleasure.

#### THE DISCOVERY

For thousands of years men have—perhaps unconsciously—benefited from these myths and have therefore believed them, nourishing them through all the various channels of culture, despite all the evidence to the contrary. But why have women, who know from experience that the vagina is *not* the source of their sexual pleasure, and who know only one kind of orgasm, believed in these myths?

Kept apart for so long, women until recently have been under great pressure not to discuss their sexual experiences with other women, just as Masters and Johnson were under great pressure not to study sex in the laboratory. Without information many women have, from childhood on, considered their own sexual experience exceptional and themselves inadequate, if not neurotic, infantile, frigid, or simply freaks. Though each one recognized that the sex myths did not describe *her own* experience, she assumed that they did describe the experience of *other* women, about whom she had no real information. And many women secretly hoped that their own experience would some day follow suit. Now that women, the only real experts on female sexuality, are beginning to talk together and compare notes, they are discovering that their experiences are remarkably similar and that they are not freaks. In the process of exposing the myths and lies, women are discovering that it is not they who have individual sex problems; it is society that has one great big political problem.

There are actually laws on the books in most states that define as "unnatural" and therefore criminal any (sexual) position other than that of the woman on the bottom and the man on the top; laws that make oral sex a crime

though for many women it is the only way of achieving orgasm with another person; laws that make homosexuality a crime, though for some people it is the only acceptable way of loving.

The pressures that have long made so many women forego orgasm during love-making and fake orgasm during intercourse are real social pressures. The explanation that it is all simply a result of ignorance, men's and women's, will not do. Hopelessly isolated from each other in their cells in a male-dominated society, even with the facts around, women have still had to fake orgasm to keep their men, to hide their imagined or imputed inadequacy, to demonstrate "love," to gain a man's approval, to boost a man's ego; or, with orgasm nowhere in sight, to get the man please to stop. But with women getting together, the day may soon be approaching when they will exert enough counterpressure to define female sexuality in their own way, and to insist that, just as male sexuality is centered not in the scrotum but in the penis, female sexuality is centered not in the vagina but in the clitoris. When that happens, perhaps it will seem as perverse for a man to ejaculate without stimulating a woman to orgasm as it is now for a woman to reach climax outside intercourse.

Think clitoris.

NOTES

1. Ruth Herschberger, *Adam's Rib* (New York: Pellegrini & Gendahl, 1948), p. 31.
2. Sigmund Freud, *New Introductory Lectures on Psycho-Analysis* (London: Hogarth Press, 1946), pp. 151-152.
3. It is not their senses; but their bodies, over which women have less control than men: men control them.
4. Denis Diderot, "On Women" (1772), in Lester Crocker, ed., *Selected Writings*, tr. Derek Colman (New York: Macmillan, 1966), p. 310.
5. Ruth and Edward Brecher, *An Analysis of Human Sexual Response* (New York: Signet, 1966), p. 84.
6. William H. Masters and Virginia E. Johnson, *Human Sexual Inadequacy* (Boston: Little Brown, 1970), p. 214. See also the earlier study by the same authors, *Human Sexual Response* (Boston: Little Brown, 1966).
7. Masters and Johnson, *Human Sexual Inadequacy*, p. 218.
8. *Ibid.*, p. 96.
9. *Ibid.*, p. 229.
10. *Ibid.*, p. 87.
11. *Ibid.*, p. 301.

12. Ann Koedt, "The Myth of the Vaginal Orgasm," in Shulamith Firestone and Ann Koedt, eds., *Notes from the Second Year: Women's Liberation* (New York, 1970), p. 39.
13. Leslie H. Farber, "I'm Sorry, Dear," in Brecher and Brecher, *op. cit.*, p. 310. Italics added.
14. *Ibid.*
15. Masters and Johnson, *Human Sexual Inadequacy*, p. 93.
16. Donald W. Hastings, "Can Specific Training Procedures Overcome Sexual Inadequacy?" in Brecher and Brecher, *op. cit.*, p. 232.
17. Koedt, *op. cit.*, p. 38.
18. Ti-Grace Atkinson, "The Institution of Sexual Intercourse," in Firestone and Koedt, *op. cit.*, p. 44.